

Work Order ID 88863***88863***

Page 1

August 8, 2012 1:49:19 PM

Item ID: D350-604-041

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Rear Locker Extender

Start Date: 8/08/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan: CLDate: 12/08/08 Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start ***NR1***Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D2273

F

D350-604-041

B

100

0.00

100

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels per PPP D350-604-041

CHG003 for D2273 rev.E (new gelcoat)

CHG004 for D2273 rev.F (new primer)

DAS
16
-83

12/08/16

MCS 12/08/16

110

0.00

110

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 17636

Description: D350-604-041 Rear locker extender.

Supplier: Delastek.

Certification of Conformity and process sheet from Delastek is required.

4 x 2600-6 Camlock stud - Ship to Delastek B 1223354 x 2600-LW Retaining washers - Ship to Delastek B 121324

CL 12/08/08 ①

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

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Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

Receive & Inspect for Damage & Mat'l Certs
Packaging

0.00

120

Packaging

Memo

0.00

Packaging

Ensure a copy of Certification of Conformity and process sheet from Delastek is attached.

1X

SD
12-8-15

130

QC5- Inspect part completeness to step on W/O

0.00

130

QC

Memo

0.00

Quality Control

Check hole locations to template. DT 8824 Check process sheet and audit.

DAS
12/08/16

SD

140

0.00

140

Small Fab

Memo

0.00

Small Fab

INSTALL DECALS AS PER DWG

12/8/16 SD

NCR: Yes / No

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150

QC5- Inspect part completeness to step on W/O

0.00

150

QC

Memo

0.00

Quality Control

DAS
16
2-3
D/18/16

160

Packaging

0.00

160

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D350-604-041

Location: _____

PPP Rev: _____

12/8/16 JF

170

QC21- Final Inspection - Work Order Release

0.00

170

QC

Memo

0.00

Quality Control

MLJ 12/08/16

MLJ 12/08/16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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Picklist Print

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Page 1

Work Order ID: 88863

Parent Item: D350-604-041

Parent Item Name: Rear Locker Extender

Start Date: 8/08/12

Required Date: 8/17/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:Q03.12.01ReformatKJ/RF IPP REV:R 12.02.07 AS PER ECN12-
521 DD verf:JLM IPP REV:S 12.04.04 AS PER DWG REV.B DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2269 Decal		Manufactured	No				Each	32.0000		1			

Location	Loc Qty	Loc Code
ST007	29	
80011	17	
86944	12	
ST009	3	
78920	3	

2600-6 Camlock Stud		Purchased	No			110	Each	351.0000	4	4			
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Location	Loc Qty	Loc Code
ST380	351	
120077	8	
121556	4	
122317	18	
122335	137	
122441	184	

2600-LW Camloc Retaining Washer		Purchased	No			110	Each	475.0000	4	4			
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Location	Loc Qty	Loc Code
380	184	
122452	184	
ST380	288	
121524	88	
122317	200	
ST381	1	
121287	1	
ST398	2	
120648	2	

~~121524~~ w/ 12 08 15 x 2
w/ 121524

CL 12/08/08

CL 12/08/08

48

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

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Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Page 2

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Parent Item Name: Rear Locker Extender

Start Date: 8/08/12

Required Date: 8/17/12

Start Qty: 1.00

Required Qty: 1.00

D350-604-041P

Purchased

No

110

Each

1.0000

1

1

Rear Locker Extender

88863 SF

Location

Loc Qty

Loc Code

ST

1

74041

0

87197

1

Manufactured

No

140

Each

37.0000

1

1

D2268

Decal

Location

Loc Qty

Loc Code

ST007

17

80010

17

ST009

20

69592

2

78908

6

86752

12

August 8, 2012 1:49:19 PM

Shop Packet Print

Page 2

NCR: Yes / No

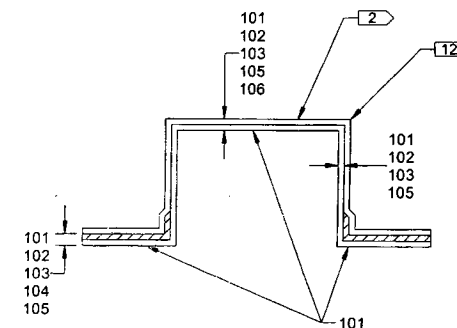
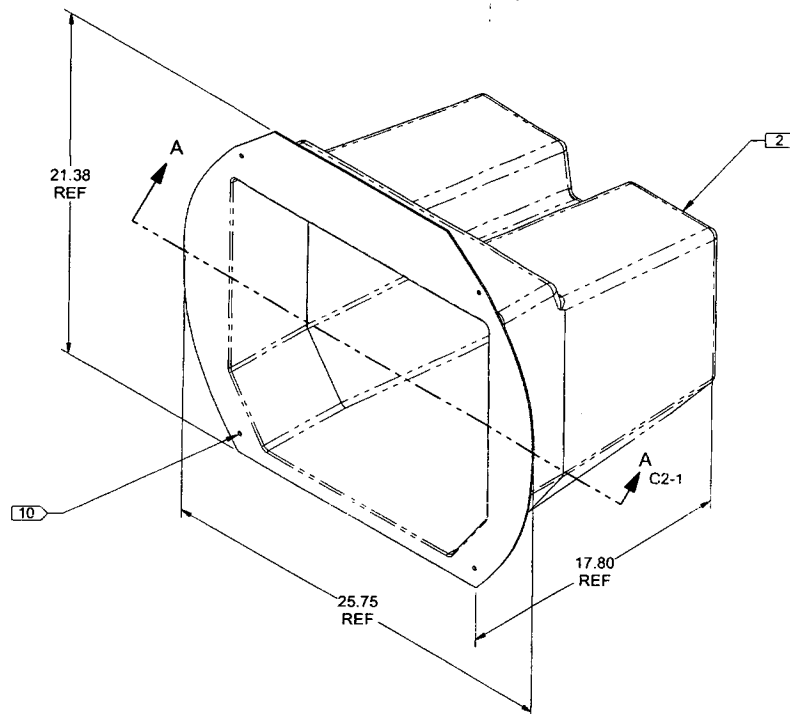
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Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



SECTION A-A
C4-1

RELEASED
2012-03-29

NOTES:

1) MATERIALS:

RESIN: DERAKANE 470-36/411/510A40
FIBRE: 9 oz = 9.7 oz 7781 WEAVE "S" GLASS
18 oz = 18.0 oz ROVING "E" GLASS

2) FINISH: FINISH THIS SURFACE WITH DUPONT GREY PRIMER LE 3404-S/LE 1175-S **A**

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1

7) WEIGHT: 7.75 lbs

8) LAMINATE PER DART QSI 006. LAMINATION SCHEDULE PER THIS DRAWING.

9) LAYUP USING DT8010 MOLD. WET LAYUP NO BAG/VACCUUM

10) TRIM & DRILL PER DT8020. OPEN HOLES TO Ø0.257 (4 PLACES)

11) CONSTRUCTION:

101-WHITE GLOSS GELCOAT # GEL 2330PAWK745 TO MIN THICKNESS OF 0.020

102-9 oz ALL OVER

103-18 oz ALL OVER

104-18 oz REINFORCE FRONT FLANGE EXTENDING 2" ON SIDES

105-9 oz ALL OVER

106-PEEL PLY

12) MATTE TO HOLD DOWN CORNERS AS REQUIRED

D2273 REAR LOCKER EXTENDER

C212108108
w/0.88863

REV.	DESCRIPTION	BY	DATE
F	PRIMER LE 3404-S/LE 1175-S WAS 1144-S, ZN A6-1	DC	12.02.27
E	CHANGED SURFACE FINISH FROM 944W005 GELCOAT TO 2330PAWK745 GELCOAT, ZN A7-1. UPDATED DWG TO CURRENT STANDARDS	DC	12.02.02
D	REMOVE EPOCAST, ADD SURFACE FINISH	CP	02.04.01
C	CLARIFY MATERIAL, LAYUP, AND TOOLING	RF	02.01.30
B	RE-DRAWN	MM	96.05.27
DESIGN	JB	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	BC		
CHECKED	BF	DRAWING NO.	REV. F
MFG. APPR.	BF	D2273	SHEET 1 OF 1
APPROVED	BF	TITLE	SCALE
DE APPR.	BF	350 REAR LOCKER EXTENDER	NTS
DATE	12.02.27	COPYRIGHT © 1996 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO17636

Purchase Order Date 8/08/12

PO Print Date 8/08/12

Page Number 1 of 3

Order From :

VU-SOL001

SOLVE COMPOSITES
29 DISTRIBUTION WAY, SUITE 101
PLATTSBURGH, NEW YORK 12901
UNITED STATES OF AMERICA

Contact Name

Vendor Phone 518-324-3838

Vendor Fax 518-324-5530

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
26/08/12
e-mag

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	D350-604-041P	Rear Locker Exten	8/17/12 Yes	1.00 Each	FedEx PI collect	\$315.0000	\$315.00
		Special Inst:	AS PER DWG D2273 REV. F B88863				
2	D350-604-041P	Rear Locker Extender	8/17/12 Yes	1.00 Each	FedEx PI collect	\$315.0000	\$315.00
		Special Inst:	AS PER DWG D2273 REV. F B88864				
3	D350-604-041P	Rear Locker Extender	8/17/12 Yes	1.00 Each	FedEx PI collect	\$315.0000	\$315.00
		Special Inst:	AS PER DWG D2273 REV. F B88865				
4	D350-604-041P	Rear Locker Extenc	8/17/12 Yes	1.00 Each	FedEx PI collect	\$315.0000	\$315.00

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required **YES** NO

Change Nbr: 1

Change Date: 8/08/12

Solve Composites

29 Distribution Way
Suite 101
Plattsburgh, NY 12901
Phone: 518-324-3838
Fax: 518-324-5530

Packing List

Bill Dart Aerospace

To: 1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

Ship Dart Aerospace

To: 1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada

Shipment No: 13427

Shipment Date: 08/14/12

Ship Via: Fedex Freight

Order Number: 11945

Order Date: 08/08/12

Customer Code: DART

Phone: (613) 632-9577

PO Number: 17636

Terms: Net 30 Days

<u>Item</u>	<u>Open</u>	<u>Shipped</u>	<u>Back Ord</u>	<u>Canceled</u>	<u>Unit</u>	<u>Description</u>	<u>Revision</u>	<u>Job Number</u>
1	10	1	9		EA	D350-604-041P D350-604-041P Rear Locker Extender	F	11945-01

Packing Clerk's Initials
Solve Composites

Received In Good Order By
Dart Aerospace



Certificate of Conformance

Solve Composites

29 Distribution Way

Plattsburgh, New York, 12901

USA

Dart Aerospace Order Number: 17583

Part Number: D2273

Quantity: 1

Drawing Number: D2273, DT8020

Serial Number (s): 0016

Solved 1/6

Date: August 14, 2012

Non-Conformances: None

This is to certify that the parts identified above conform to all applicable drawings and/or specifications as evidenced by reports on file, and that all other purchase order and quality requirements have been met.

Jerry Regell

<i>Solve Composites</i>		29 Distribution Way, Suite 101 Plattsburgh, NY 12901 Tel: (518) 324-3838 Fax: (518) 324-5530		Isometric View
Date		Project	NovaBus	
Resin Batch #		Job	DART	
Gel-Coat Batch #				
NOVA Drg No.	D2273 Rev. F	Serial #	0016	
Panel Ref.	350 REAR LOCKER EXTENDER			